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## APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\*** *T.T.*

This appln claims benefit of 60/430,207 12/02/2002  
 and claims benefit of 60/430,213 12/02/2002  
 and claims benefit of 60/430,214 12/02/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *T.T.* **NONE**

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

**\*\* 03/04/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 5	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>T.T.</i>	INITIALS		
Verified and Acknowledged				

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## TITLE

Optical correlation device and method

FILING FEE  RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other
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